

## Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name  Schnons Hom Service (Freck # 5-13378)  Establishment Address (number and street, city, state, zip code)  4116 (apriled De Jan Albang, 124 47157)  Owner  Owner's Address  Person in Charge  Cot of Le Krisen  Responsible Person's E-mail								Telephone Number 8:2 9:45 2:420  5:02 5:37 8:48  Purpose: Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary	Follow-up Release Date    C   NC   R    Menu Type (See back of page)			
Certified Food Manager  • CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COL									1_X_2345			
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S  Section# C/NC R Narrative								MARY OF VIOLATIONS" A	AND IN THE N	D IN THE NARRATIVE BELOW AS "R"  To Be Corrected By		
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